

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	1-12-01
FORMALITY REVIEW	B.T.	897	03-27-01
RESPONSE FORMALITY REVIEW	10	36966	05/06/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/25/02
2	8/24/02
3	8/24/02
4	8/24/02
5	8/24/02
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46	8/24/02
47	8/24/02
48	8/24/02
49	8/24/02
50	8/24/02

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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